

November 1 - 18, 2022

ate : Pay Period End Date : Check # : Other 1 : Other 2

Header			

Header

Columns

Footer

Print

	Screen	Print	Title
Default Title	<input checked="" type="checkbox"/>	<input type="checkbox"/>	STANDARD DROP SHIP...
Date	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PO DATE
P.O. No.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PROAIM BILLING PO#
Vendor	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SUPPLIER
Ship To	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	SHIPPING ADDRESS
Other1	<input type="checkbox"/>	<input type="checkbox"/>	END-USER PO#
Terms	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	TERMS
Due Date	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RDD
Account Number	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Account#
Expected	<input type="checkbox"/>	<input type="checkbox"/>	
Ship Via	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Over 5K (1)
FOB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Over 5K (2)
Other2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	END-USER PO#

	Screen	Print	Order	Title
Service Date	<input type="checkbox"/>	<input type="checkbox"/>	0	Serviced
Item	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1	ITEM CODE
Customer: Job	<input type="checkbox"/>	<input type="checkbox"/>	0	Customer
Description	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2	DESCRIPTION
Mfr Part Number	<input type="checkbox"/>	<input type="checkbox"/>	0	MPN
Quantity	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4	QTY
Unit of Measure	<input type="checkbox"/>	<input type="checkbox"/>	0	U/M
Rate	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3	PO PRICE
Amount	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6	LINE TOTAL
Backordered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0	Backordered
Received	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0	Rcv/d
Other 1	<input type="checkbox"/>	<input type="checkbox"/>	0	
Other 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5	END-USER PO#

END-USER PO#

672-D30171

R... CLSD